PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number

| Attorney Docket Number | 1,11,259,0004

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)			Attorney Do	cket Number	LIL358.000	1	
		First Named	Inventor	North	. Chai	rles Dean	
			со	MPLETE IF KN		Teo Dean	
		-	Application	Number			
Declaration Declaration		on	Filing Date			-	
Submitted OR With Initial	Filing (su	rcnarge	Art Unit				
Filing	(37 ČFR required)		Examiner N	ame			
I hereby declare that:			··· - ··- <u>-</u>				
Each inventor's residence, maili	ing address, ar	nd citizenship are a	s stated be	elow next to	their name.		
I believe the inventor(s) named which a patent is sought on the			inventor(s)	of the subje	ct matter whic	h is claim	ed and for
ROUND BOAT				· · · · · · · · · · · · · · · · · · ·			
THOUSE BOX							
							
the specification of which		(Title of the I	Invention)				
is attached hereto							
OR □			1				
was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have review amended by any amendment sp	ed and unders	stand the contents	of the abov	e identified s	specification, i	ncluding t	he claims, as
I acknowledge the duty to disc continuation-in-part applications and the national or PCT internat	s, material info	mation which bec	ame availa	able betweer	defined in 37 the filing dat	CFR 1.5 te of the p	6, including for prior application
I hereby claim foreign priority b					f any foreign	applicatio	n(s) for patent,
inventor's or plant breeder's rigl country other than the United St	hts certificate(s	s), or 365(a) of any	y PCT inte	mational app	olication which	n designat	ted at least one
application for patent, inventor's	or plant breed	ler's rights certifica					
before that of the application on Prior Foreign Application	which priority	is claimed. Foreign Filing	Data I	Drie	it. lo	amifical C	
Number(s)	Country	(MM/DD/YY)		Prior Not Cla		Yes Yes	opy Attached?
]		
				Ī	7		
				F	i l	Ī	
				}	i l	\Box	
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							

[Page 1 of 2]

[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Approved for use through 08/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2 of 2				
Name of Additional Joint Inventor, if any:		A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any)		Family Name or	Surname			
ROD RODNEY FRWIN	T***	OWARD				
Inventor's Rodney Druin	y S	Yowan		Date		
Porter (/ Residence: City	Oklahon State			SA Citizenship		
32558 E. 241 St. South Mailing Address	<u>-</u>					
Mailing Address						
Porter City	Oklaho State		74454 Zip	USA Country		
Name of Additional Joint Inventor, if any:		☐ A petition	has been filed for this u	nsigned inv	ventor	
Given Name (first and middle (if any)		Family Name or Surname				
			, · · · · · · · · · · · · · · · · · · ·			
Inventor's Signature		Date				
Residence: City	State	e Country C		Citizenship		
Mailing Address						
Mailing Address						
City	State		Zip	Country		
Name of Additional Joint Inventor, if any:		A petition	has been filed for this u	nsigned inv	ventor	
Given Name (first and middle (if any)		Family Name or Surname				
Inventor's Signature		Date		,	p.*-	
Residence: City	State	te Country Citize		Citizenship		
Mailing Address						
Mailing Address						
Cib.	Ctata	·	7:-	Caumter		

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (06-03)
Approved for use through 07/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Custome	r Number:	3	4487		OR		Corresp	condence address below
Name									
Address								<u> </u>	
City				State	-				ZIP
Country		Telephone				Fax			
I hereby declare that all statem and belief are believed to be statements and the like so mad false statements may jeopardiz	true; and furt de are punishab	ther that the	ese state r imprisc	ements inment	were or bo	made th, und	with der 18	the kno	wledge that willful false
NAME OF SOLE OR FIRST IN	VENTOR:		A pe	etition I	nas bee	en filed	d for thi	is unsigr	ned inventor
Given Name (first and middle [if any])	harles	De	AN)		F	amily I Surna orth	Name	No	orth
Inventor's Signature Charle	, () _.	To	tt	>					Date 02-13-04
Residence: City	State	/		Coun	try			Citize	nship
Porter	ок			USA				USA	
Mailing Address 32558 E. 241 St. South			-						
City	State				ZIP				Country
Porter	ок				74454				USA
NAME OF SECOND INVENTO	R:							en filed f	for this unsigned inventor
Given Name (first and middle [if any]) Mark	alto	ugla	<u>v</u>			mily N Surna		hil	dun
Inventor's Signature	Pula	hen							Date 2//3/04
Residence: City	State			Coun	try			Citizer	nship /
Porter	OK			USA				USA	
Mailing Address 32558 E. 241 St. South									
City	State				ZIP		-	Count	ry
Porter	ок				74454			USA	
Additional inventors or a legal re	presentative are bei	ng named on th	ies	uppleme	ntal shee	et(s) PT	O/SB/02/	A or 02LR	attached hereto.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control numbe

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

red to respond to a collection of into	mation unless it displays a valid OMB control number.
Application Number	
Filing Date	
First Named Inventor	.North, Charles Dean
Title	Round Boat
Art Unit	
Examiner Name	
Attorney Docket Number	LIL358.0001

I hereby appoint:			٦		
Practitioners associated with the Customer Number:	3448	7			
OR L			J		
Practitioner(s) named below:					
Name		Registration Nu	mber		
·					
			· ··· <u>-</u> ·		
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above, and to tra	insact all business in	the United States Patent and		
Please recognize or change the correspondence address for the	he above identified applica	ation to:			
Fredse recognize of change the correspondence address for the	ne above-identified applica	ation to.			
The address associated with the above-mentioned C	ustomer Number:				
OR [· · · · · · · · · · · · · · · · · · ·				
The address associated with Customer Number:					
OR					
Firm or					
Individual Name Address					
Address					
City	State		Zip		
Country	0.0.0				
Telephone	Fax				
I am the:	<u> </u>				
Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR	2 71				
Statement under 37 CFR 3.73(b) is enclosed. (Form					
SIGNATURE of	Applicant or Assignee of	Record			
Name Rod Howard	,				
Signature Loding drain Flow	and				
Date 2-13-04		Telephone 918	.482.5992		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
★Total of 3 forms are submitted.			· · · · · · · · · · · · · · · · · · ·		

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
d to a collection of information unloss it disables a collection of information unloss it disables a collection. Under the Paperwork Reduction Act of 1995, no persons are required to

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

red to respond to a collection of info	imation unless it display	ys a valid OMB co	ontrol number.
Application Number		····	
Filing Date			
First Named Inventor	North, C	Charles	Dean
Title	Round Boat		
Art Unit			
Examiner Name			
Attorney Docket Number	LIL358.0001		

I bearby appaints			
I hereby appoint:			
Practitioners associated with the Customer Number:	34487		
OR			
Practitioner(s) named below:			
Name		Registration	n Number
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above, and to trans	sact all busines	s in the United States Patent and
Please recognize or change the correspondence address for t	the above-identified application	on to:	
The address associated with the above-mentioned C		•	
OR			
The address associated with Customer Number:			
OR Firm or			
Individual Name			
Address			
Address			
City	State		Zip
Country			
Telephone	Fax		
l am the: ✓ Applicant/Inventor.			
Assignee of record of the entire interest. See 37 CFR Statement under 37 CFR 3.73(b) is enclosed. (Form	3.71. PTO/SB/96)		
	Applicant or Assignee of R	Record	
Name Mark Childress			
Signature Mark O. Children			
Date 2/12/04		Telephone	918.482.5992
NOTE: Signatures of all the inventors or assignees of record of the enti- forms if more than one signature is required, see below.	re interest or their representative	(s) are required.	Submit multiple
*Total of 3 forms are submitted.			

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

ed to respond to a conceden or into	madon dilless it displays a valid Olvib condor number.
Application Number	
Filing Date	
First Named Inventor	th, Chalres Dean
Title	Round Boat
Art Unit	
Examiner Name	
Attorney Docket Number	LIL358.0001

I hereby appoint:			<u> </u>	
Practitioners associated with the Customer Number:	34487			
OR L				
Practitioner(s) named below:				
Name		Registration Num	iber	
			<u> </u>	
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above, and to trans	sact all business in th	e United States Patent and	
			<u>- '' '</u>	
Please recognize or change the correspondence address for the	he above-identified application	on to:		
The address associated with the above-mentioned C	ustomer Number:			
OR I				
l				
The address associated with Customer Number:				
OR L				
Firm or				
Individual Name Address				
Address				
City	State	Ι.	Zip	
Country				
Telephone	Fax			
I am the:	· · · · · · · · · · · · · · · · · · ·	•	·	
Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR	3.71.			
Statement under 37 CFR 3.73(b) is enclosed. (Form	PTO/SB/96)			
	Applicant or Assignee of F	Record		
Name Dean North				
Signature (harles 1) I fath				
Date 2-12-04		Telephone 918.4	482.5992	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
*Total of 3 forms are submitted.				

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.